Toronto Administration
Port Portuaire
Authority de Toronto

APPLICATION FOR AUTHORIZATION OF AN EVENT / ACTIVITY

Application No: Account No: Dated:	(40410-110)	Ref: Tel. Fax Email:	(416) 462-3937 (416) 462-1612 harbourapps@portstoronto.com
THIS APPLICATION Toronto Port Authori		uct an Event / A	ctivity in the waters in the jurisdiction of the
Name of Applicant: _			
Event / Activity Date/	ty Date/s:Time/s:		
Event / Activity Loca	tion:	·	
Description of any Sp	pecial Requirements: (pleas	se attach Safety	Plan and Diagram if placing markers)
The provision of falso	e or misleading information v	will result in auth	(add separate sheet if necessary) norization being withdrawn by TPA.
together with Admin		able to the To	to the Harbour Master's office for review, ronto Port Authority) and signed Waiver of
AUTHORIT) be provided Liability clau	AND HIS MAJESTY IN RIPRIOR TO THE WORK IN QUESTION USE AND A Severability of The applicant will notify the	IGHT OF CANA Insurance als Interest clause	coverage with the "TORONTO PORT ADA" added as an Additional Insured, must so to include a Subrogation clause, a Cross e. Wreck Removal may be required as t that the policy is amended or cancelled.
		(if not a legal	gnature of Group/Organization entity, Signature of individual/s sonal responsibility)
		Print Name ar	nd Address:
(HST Reg. No. 108122	458RT)		
Note: Fee waived if Re			
Charity Reg. No. (if a	applicable)		Fax
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